

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF SOUTH CAROLINA

Case number (if known)

Chapter you are filing under:

Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Steven

First name

Eugene

Middle name

Harrison

Last name and Suffix (Sr., Jr., II, III)

About Debtor 2 (Spouse Only in a Joint Case):

JoAnne

First name

Evelyn

Middle name

Harrison

Last name and Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names and any assumed, trade names and *doing business as* names.

Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.

Steven E Harrison
Steve Eugene Harrison
Steve Eugene Harrison, Sr.
Steve E Harrison
Steven Eugene Harrison, Sr.

JoAnne E Harrison
Joanne E Harrison

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx-xx-3457

xxx-xx-6695

Debtor 1 **Steven Eugene Harrison**
Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known)

About Debtor 1:

4. Your Employer Identification Number (EIN), if any.

EIN

About Debtor 2 (Spouse Only in a Joint Case):

EIN

5. Where you live

**120 Tabby Creek Cir
Summerville, SC 29486**

Number, Street, City, State & ZIP Code

Berkeley

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

If Debtor 2 lives at a different address:

Number, Street, City, State & ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

6. Why you are choosing *this district* to file for bankruptcy

Check one:

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Check one:

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Debtor 1 **Steven Eugene Harrison**
 Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

Part 2: Tell the Court About Your Bankruptcy Case

7. **The chapter of the Bankruptcy Code you are choosing to file under** *Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.*

Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

8. **How you will pay the fee** **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
 I need to pay the fee in installments. If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
 I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. **Have you filed for bankruptcy within the last 8 years?** No.
 Yes.

District	<u>South Carolina</u>	When	<u>1/15/19</u>	Case number	<u>19-00300</u>
District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?** No
 Yes.

Debtor	_____	Relationship to you	_____		
District	_____	When	_____	Case number, if known	_____
Debtor	_____	Relationship to you	_____		
District	_____	When	_____	Case number, if known	_____

11. **Do you rent your residence?** No. Go to line 12.
 Yes. Has your landlord obtained an eviction judgment against you?
 No. Go to line 12.
 Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1 **Steven Eugene Harrison**
 Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known)

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

No. Go to Part 4.

Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

No. I am not filing under Chapter 11.

No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.

Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No.

Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 **Steven Eugene Harrison**
Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:*You must check one:*

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

 Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

 Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

 Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):*You must check one:*

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

 Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

 Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

 Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 **Steven Eugene Harrison**
 Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?	16a. Are your debts primarily consumer debts? <i>Consumer debts</i> are debts that you incurred for a personal, family, or household purpose.		
	<input type="checkbox"/> No. Go to line 16b.		
	<input checked="" type="checkbox"/> Yes. Go to line 17.		
16b. Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.			
	<input type="checkbox"/> No. Go to line 16c.		
	<input type="checkbox"/> Yes. Go to line 17.		
16c. State the type of debts you owe that are not consumer debts or business debts			
<hr/>			
17. Are you filing under Chapter 7?	<input checked="" type="checkbox"/> No. I am not filing under Chapter 7. Go to line 18.		
Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	<input type="checkbox"/> Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?		
	<input type="checkbox"/> No		
	<input type="checkbox"/> Yes		
18. How many Creditors do you estimate that you owe?	<input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> More than 100,000
19. How much do you estimate your assets to be worth?	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input checked="" type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion
20. How much do you estimate your liabilities to be?	<input type="checkbox"/> \$0 - \$50,000 <input checked="" type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion

Part 7: Sign Below

For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Steven Eugene Harrison

Steven Eugene Harrison

Signature of Debtor 1

/s/ JoAnne Evelyn Harrison

JoAnne Evelyn Harrison

Signature of Debtor 2

Executed on August 15, 2024
 MM / DD / YYYY

Executed on August 15, 2024
 MM / DD / YYYY

Debtor 1 **Steven Eugene Harrison**
Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

For your attorney, if you are represented by one

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Lauren Clark

Signature of Attorney for Debtor

Date

August 15, 2024

MM / DD / YYYY

Lauren Clark 10601

Printed name

Law Office of Lauren Clark

Firm name

**925 D Wappoo Rd
Charleston, SC 29407**

Number, Street, City, State & ZIP Code

Contact phone

803-386-8868

Email address

laurenclarklaw@aol.com

10601 SC

Bar number & State



Party Search Results

Search Criteria: Party Search; Jurisdiction Type: [Bankruptcy]; SSN: [REDACTED] 3457]**Result Count:** 5 (1 page)**Current Page:** 1

Party Name	Case Number	Case Title	Court	Date Filed	Date Closed
Harrison, Steven E. (db)	2:1999bk09551	Steven E. Harrison and Joanne E. Harrison	South Carolina Bankruptcy Court	11/05/1999	07/28/2004
Harrison, Steven Eugene (db)	2:2009bk07029	Steven Eugene Harrison and JoAnne Evelyn Harrison	South Carolina Bankruptcy Court	09/23/2009	01/11/2011
Harrison, Steve Eugene (db)	2:2019bk00300	Steven Eugene Harrison and JoAnne Evelyn Harrison	South Carolina Bankruptcy Court	01/15/2019	04/23/2019
Harrison, Steven E (db)	2:2019bk00300	Steven Eugene Harrison and JoAnne Evelyn Harrison	South Carolina Bankruptcy Court	01/15/2019	04/23/2019
Harrison, Steven Eugene (db)	2:2019bk00300	Steven Eugene Harrison and JoAnne Evelyn Harrison	South Carolina Bankruptcy Court	01/15/2019	04/23/2019

PACER Service Center		07/17/2024 13:26:29
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Client Code		
Description	All Court Types Party Search All Courts; SSN: [REDACTED] 3457; All Courts; Jurisdiction BK; Page: 1	
Billable Pages	1 (\$0.10)	

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Search Criteria: Party Search; Jurisdiction Type: [Bankruptcy]; SSN: [REDACTED]-6695]**Result Count:** 7 (1 page)**Current Page:** 1

Party Name	Case Number	Case Title	Court	Date Filed	Date Closed
Harrison, Joanne E. (db)	2:1999bk09551	Steven E. Harrison and Joanne E. Harrison	South Carolina Bankruptcy Court	11/05/1999	07/28/2004
Harrison, Joanne E. (jdb)	2:2009bk07029	Steven Eugene Harrison and JoAnne Evelyn Harrison	South Carolina Bankruptcy Court	09/23/2009	01/11/2011
Harrison, JoAnne Evelyn (jdb)	2:2009bk07029	Steven Eugene Harrison and JoAnne Evelyn Harrison	South Carolina Bankruptcy Court	09/23/2009	01/11/2011
Harrison, JoAnne E (jdb)	2:2019bk00300	Steven Eugene Harrison and JoAnne Evelyn Harrison	South Carolina Bankruptcy Court	01/15/2019	04/23/2019
Harrison, Joanne E (jdb)	2:2019bk00300	Steven Eugene Harrison and JoAnne Evelyn Harrison	South Carolina Bankruptcy Court	01/15/2019	04/23/2019
Harrison, JoAnne Evelyn (jdb)	2:2019bk00300	Steven Eugene Harrison and JoAnne Evelyn Harrison	South Carolina Bankruptcy Court	01/15/2019	04/23/2019
Harrison, Joanne Evelyn (jdb)	2:2019bk00300	Steven Eugene Harrison and JoAnne Evelyn Harrison	South Carolina Bankruptcy Court	01/15/2019	04/23/2019

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User	laurenclarklaw
Client Code	
Description	All Court Types Party Search All Courts; SSN: [REDACTED]-6695; All Courts; Jurisdiction BK; Page: 1
Billable Pages	1 (\$0.10)

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Fill in this information to identify your case:

Debtor 1	Steven Eugene Harrison		
	First Name	Middle Name	Last Name
Debtor 2	JoAnne Evelyn Harrison		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA			
Case number (if known) _____			

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	\$ 129,000.00
1a.	Copy line 55, Total real estate, from Schedule A/B.....	\$ 129,000.00
1b.	Copy line 62, Total personal property, from Schedule A/B.....	\$ 15,571.00
1c.	Copy line 63, Total of all property on Schedule A/B.....	\$ 144,571.00

Part 2: Summarize Your Liabilities

		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	\$ 81,090.00
2a.	Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ...	\$ 81,090.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$ 0.00
3a.	Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ 0.00
3b.	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$ 16,254.00
		Your total liabilities \$ 97,344.00

Part 3: Summarize Your Income and Expenses

4.	Schedule I: Your Income (Official Form 106I)	\$ 4,399.00
	Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$ 4,399.00
5.	Schedule J: Your Expenses (Official Form 106J)	\$ 3,654.00
	Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$ 3,654.00

Part 4: Answer These Questions for Administrative and Statistical Records

- Are you filing for bankruptcy under Chapters 7, 11, or 13?**

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes
- What kind of debt do you have?**

Your debts are primarily consumer debts. *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Debtor 1 **Steven Eugene Harrison**
Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 1,829.00

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

From Part 4 on Schedule E/F, copy the following:	Total claim
9a. Domestic support obligations (Copy line 6a.)	\$ <u>0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ <u>0.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ <u>0.00</u>
9d. Student loans. (Copy line 6f.)	\$ <u>0.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ <u>0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	\$ <u>0.00</u>
9g. Total. Add lines 9a through 9f.	\$ <u>0.00</u>

Fill in this information to identify your case and this filing:

Debtor 1	Steven Eugene Harrison	
	First Name	Middle Name
Debtor 2	JoAnne Evelyn Harrison	
(Spouse, if filing)	First Name	Middle Name
United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA		
Case number _____		

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.
 Yes. Where is the property?

1.1

120 Tabby Creek Cir

Street address, if available, or other description

Summerville **SC** **29486-0000**
 City State ZIP Code

What is the property? Check all that apply

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
\$129,000.00	\$129,000.00

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

JTROS

Check if this is community property
 (see instructions)

Other information you wish to add about this item, such as local property identification number:

House/Lot located at 120 Tabby Creek Cir, Summerville SC 29486; purchased in 12/1982 for apprx \$43,000, tax assessment \$129,000 (attached); FMV based on neighborhood conditions, home condition, recent sales. TMS# 233-03-03-015

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$129,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

Debtor 1 **Steven Eugene Harrison**
 Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

No
 Yes

3.1 Make: **Ford**
 Model: **F-150**
 Year: **2004**
 Approximate mileage: **167,000**
 Other information:
Vin: 1FTRX12W64NC15353

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this is community property
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$2,300.00 **\$2,300.00**

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

No
 Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$2,300.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

No
 Yes. Describe.....

Appliances, furniture, misc houseware, etc.

\$2,500.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

No
 Yes. Describe.....

Personal electronics and electronic equipment (games/media players, etc), approx.

\$500.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No
 Yes. Describe.....

Precious moments, M&Ms memorabilia, apprx

\$300.00

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

No

Debtor 1 **Steven Eugene Harrison**
Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

Yes. Describe.....

Misc used hobby and craft supplies, household tools, gardening supplies, etc.

\$350.00

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

No

Yes. Describe.....

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

No

Yes. Describe.....

Casual clothing

\$400.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No

Yes. Describe.....

Watches, rings, misc. costume jewelry, apprx.

\$100.00

13. Non-farm animals

Examples: Dogs, cats, birds, horses

No

Yes. Describe.....

3 household dogs, Faith, Marie & Freckles, apprx.

\$75.00

14. Any other personal and household items you did not already list, including any health aids you did not list

No

Yes. Give specific information.....

2 Walkers, wheelchair, cane, electric cart, 2 C-Pap machines; tens unit; catheters apprx

\$1,000.00

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$5,225.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No

Yes.....

**Misc.
COH-EST**

\$20.00

Debtor 1 **Steven Eugene Harrison**
 Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No

Yes.....

Institution name:

2 Checking and 2 17.1. Savings	Navy FCU; negative balance, see sch F	\$0.00
---	--	---------------

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

No

Yes.....

Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

No

Yes. Give specific information about them.....

Name of entity:

% of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

No

Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No

Yes. List each account separately.

Type of account:

Institution name:

Pension	Pension from former employer , not contributing, benefits for life; value unk.	Unknown
----------------	---	----------------

Pension	Navy Retirement; apprx.	Unknown
----------------	--------------------------------	----------------

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Yes.

Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

No

Yes..... Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Yes.....

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

No

Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

Debtor 1 **Steven Eugene Harrison**
 Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

No

Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

Debtor received tax refund of \$2,545 for 2023. Anticipated, accrued 2024 tax refund, apprx.

Federal & State

\$1,591.00

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No

Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No

Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

**Homeowners insurance (escrowed)
 Car Insurance
 Health/Medical Insurance (medicare/
 tricare/ nationwide/ vsp)**

No known claims outstanding.

\$0.00

**Wife Physicians Life Insurance Policy;
 husband beneficiary; cash value apprx.**

Steven Harrison

\$575.00

**Husband United of Omaha Life
 Insurance policy; wife beneficiary;
 apprx.**

JoAnne Harrison

\$5,000.00

**Wife Physicians Life Insurance Policy;
 husband beneficiary; cash value apprx.**

Steven Harrison

\$860.00

Debtor 1 **Steven Eugene Harrison**
Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

No
 Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

No
 Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

No
 Yes. Describe each claim.....

35. Any financial assets you did not already list

No
 Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$8,046.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.
 Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.
 Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

No
 Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Debtor 1 **Steven Eugene Harrison**
Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

Part 8: List the Totals of Each Part of this Form	
55. Part 1: Total real estate, line 2	\$129,000.00
56. Part 2: Total vehicles, line 5	\$2,300.00
57. Part 3: Total personal and household items, line 15	\$5,225.00
58. Part 4: Total financial assets, line 36	\$8,046.00
59. Part 5: Total business-related property, line 45	\$0.00
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00
61. Part 7: Total other property not listed, line 54	\$0.00
62. Total personal property. Add lines 56 through 61...	\$15,571.00
	Copy personal property total
63. Total of all property on Schedule A/B. Add line 55 + line 62	\$144,571.00



CarMax has made you a no-obligation offer.

Compare your offer with the Edmunds Appraisal Report >

Offer Details

Edmunds Appraisal



Your offer:

\$2,300*

Expires: 7/9/24

Offer Code: RP3L4X2V

Save this offer

Email

SEND

Print Offer Text Offer

Vehicle Details:

[Edit Vehicle](#)

2004 Ford F-150

VIN: 1FTRX12W64NC15353 | Mileage: 167,000

See what customers are saying

4.6

303

[Reviews](#)

Redeem Your Offer



Schedule an appointment and sell your car at any CarMax location.

Select a location:

CarMax South Boulevard, NC

10510 Cadillac Street

Pineville, NC 28134

[\(888\) 720-0696](#) | [Directions](#)

6.83 miles away

Base Taxes	\$354.50
Penalty	\$0.00
Total Due	\$354.50

Status	Paid
Last Payment Date	12/15/23
Amount Paid	\$354.50

HARRISON STEVEN E & JOANNE E
SURVIVORSHI
120 TABBY CREEK CIR
SUMMERTON, SC 29486-1790

Asset Information

Parcel Number	233-03-03-015
Acres	.00
Assessed Value	\$3,220.00
Appraised Value	\$80,500.00

Bill Information

Record Type	Real Property
Tax Year	2023
Invoice	2023-0060007

Penalty Dates

Jan 16, 2024	\$359.41
Feb 01, 2024	\$370.86
Mar 18, 2024	\$379.04

Description

120 TABBY CREEK CIR

Taxes Breakdown

County Operations	\$138.46
County Bonds	\$14.49
Cypress Gardens	\$3.22
School Operations	\$488.79
School Bonds	\$177.10
Trident Tech	\$10.95
SANGAREE	\$161.00
County Homestead Exemption	-\$213.80
SANGAREE Homestead Exemption	-\$100.00
School Tax Credit	-\$488.80
County Sales Tax Credit	-\$27.79
County Fire Fee	\$79.88
Stormwater Utility Fee	\$36.00
Solid Waste User Fee	\$75.00
TOTAL DUE on This Property	\$354.50

Fill in this information to identify your case:

Debtor 1	Steven Eugene Harrison		
	First Name	Middle Name	Last Name
Debtor 2	JoAnne Evelyn Harrison		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF SOUTH CAROLINA		
Case number (if known)			

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	Check only one box for each exemption.	
120 Tabby Creek Cir Summerville, SC 29483 Berkeley County. TMS# 233-03-03-015 Line from <i>Schedule A/B</i> : 1.1	\$129,000.00	<input checked="" type="checkbox"/> \$76,125.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(1)(a) Husband claiming homestead, claiming cash Wife
120 Tabby Creek Cir Summerville, SC 29483 Berkeley County. TMS# 233-03-03-015 Line from <i>Schedule A/B</i> : 1.1	\$129,000.00	<input checked="" type="checkbox"/> \$12,200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(7) Unused Motor Vehicle exemption
120 Tabby Creek Cir Summerville, SC 29483 Berkeley County. TMS# 233-03-03-015 Line from <i>Schedule A/B</i> : 1.1	\$129,000.00	<input checked="" type="checkbox"/> \$3,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(7) Unused Household Goods exemption
2004 Ford F-150 167,000 miles Vin: 1FTRX12W64NC15353 Line from <i>Schedule A/B</i> : 3.1	\$2,300.00	<input checked="" type="checkbox"/> \$3,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(2)
Appliances, furniture, misc houseware, etc. Line from <i>Schedule A/B</i> : 6.1	\$2,500.00	<input checked="" type="checkbox"/> \$3,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(3)

Debtor 1 Steven Eugene Harrison
Debtor 2 JoAnne Evelyn Harrison

		Case number (if known)		
Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Personal electronics and electronic equipment (games/media players, etc), approx. Line from Schedule A/B: 7.1		\$500.00	<input checked="" type="checkbox"/> \$1,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(3)
Precious moments, M&Ms memorabilia, apprx Line from Schedule A/B: 8.1		\$300.00	<input checked="" type="checkbox"/> \$300.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(3)
Misc used hobby and craft supplies, household tools, gardening supplies, etc. Line from Schedule A/B: 9.1		\$350.00	<input checked="" type="checkbox"/> \$350.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(3)
Casual clothing Line from Schedule A/B: 11.1		\$400.00	<input checked="" type="checkbox"/> \$500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(3)
Watches, rings, misc. costume jewelry, apprx. Line from Schedule A/B: 12.1		\$100.00	<input checked="" type="checkbox"/> \$3,050.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(4)
3 household dogs, Faith, Marie & Freckles, apprx. Line from Schedule A/B: 13.1		\$75.00	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(3)
2 Walkers, wheelchair, cane, electric cart, 2 C-Pap machines; tens unit; catheters apprx Line from Schedule A/B: 14.1		\$1,000.00	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(10)
Misc. COH-EST Line from Schedule A/B: 16.1		\$20.00	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(5) Husband claiming homestead, claiming cash Wife
Pension: Pension from former employer , not contributing, benefits for life; value unk. Line from Schedule A/B: 21.1		Unknown	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(14)
Pension: Pension from former employer , not contributing, benefits for life; value unk. Line from Schedule A/B: 21.1		Unknown	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(b)(3)(C)
Pension: Navy Retirement; apprx. Line from Schedule A/B: 21.2		Unknown	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(14)

Debtor 1 **Steven Eugene Harrison**
Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known)

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Pension: Navy Retirement; apprx. Line from Schedule A/B: 21.2	Unknown	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(b)(3)(C)
Federal & State: Debtor received tax refund of \$2,545 for 2023. Anticipated, accrued 2024 tax refund, apprx. Line from Schedule A/B: 28.1	\$1,591.00	<input checked="" type="checkbox"/> \$3,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(5) Husband claiming homestead, claiming cash Wife
Wife Physicians Life Insurance Policy; husband beneficiary; cash value apprx. Beneficiary: Steven Harrison Line from Schedule A/B: 31.2	\$575.00	<input checked="" type="checkbox"/> \$2,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(9)
Husband United of Omaha Life Insurance policy; wife beneficiary; apprx. Beneficiary: JoAnne Harrison Line from Schedule A/B: 31.3	\$5,000.00	<input checked="" type="checkbox"/> \$6,100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(9)
Wife Physicians Life Insurance Policy; husband beneficiary; cash value apprx. Beneficiary: Steven Harrison Line from Schedule A/B: 31.4	\$860.00	<input checked="" type="checkbox"/> \$4,100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(9)

3. Are you claiming a homestead exemption of more than \$189,050?

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

No
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 No
 Yes

Fill in this information to identify your case:

Debtor 1	Steven Eugene Harrison		
	First Name	Middle Name	Last Name
Debtor 2	JoAnne Evelyn Harrison		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF SOUTH CAROLINA		
Case number (if known)			

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

2.1	Creditor's Name	Describe the property that secures the claim:	Column A	Column B	Column C
			Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	PennyMac	120 Tabby Creek Cir Summerville, SC 29483 Berkeley County. TMS# 233-03-03-015	\$81,090.00	\$129,000.00	\$0.00
	6101 Condor Drive Moorpark, CA 93021	Number, Street, City, State & Zip Code	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
			Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Mortgage		
	Date debt was incurred	Last 4 digits of account number			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$81,090.00

If this is the last page of your form, add the dollar value totals from all pages.

\$81,090.00

Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

[] Name, Number, Street, City, State & Zip Code PenMac PO Box 514387 Los Angeles, CA 90051	On which line in Part 1 did you enter the creditor? 2.1
	Last 4 digits of account number _____

Debtor 1	Steven Eugene Harrison	Case number (if known)	
	First Name _____	Middle Name _____	Last Name _____
Debtor 2	JoAnne Evelyn Harrison		
	First Name _____	Middle Name _____	Last Name _____
<input type="checkbox"/> Name, Number, Street, City, State & Zip Code		On which line in Part 1 did you enter the creditor? <u>2.1</u>	
PennyMac 3043 Townsgate Rd Ste 200 Westlake Village, CA 91361-3027		Last 4 digits of account number _____	

Fill in this information to identify your case:

Debtor 1	Steven Eugene Harrison		
	First Name	Middle Name	Last Name
Debtor 2	JoAnne Evelyn Harrison		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF SOUTH CAROLINA		
Case number (if known)			

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.
 Yes.

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		Total claim
4.1	Avant/WebBank Nonpriority Creditor's Name 222 North Lasalle Street Suite 1600 Chicago, IL 60601 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card _____

Debtor 1 **Steven Eugene Harrison**
Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

4.2

Capital One

Nonpriority Creditor's Name

Attn: Bankruptcy**Po Box 30285****Salt Lake City, UT 84130**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt
Is the claim subject to offset?
 No
 Yes

Last 4 digits of account number _____

\$384.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed
Type of NONPRIORITY unsecured claim:
 Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Credit Card**

4.3

Capital One

Nonpriority Creditor's Name

Attn: Bankruptcy**Po Box 30285****Salt Lake City, UT 84130**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt
Is the claim subject to offset?
 No
 Yes

Last 4 digits of account number _____

\$383.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed
Type of NONPRIORITY unsecured claim:
 Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Credit Card**

4.4

Comenity Bank/Ashley Stewart

Nonpriority Creditor's Name

Attn: Bankruptcy**Po Box 182125****Columbus, OH 43218**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt
Is the claim subject to offset?
 No
 Yes

Last 4 digits of account number _____

\$188.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed
Type of NONPRIORITY unsecured claim:
 Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Charge Account**

Debtor 1 **Steven Eugene Harrison**
Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

4.5	Comenity Bank/Kingsize Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125 Columbus, OH 43218 Number Street City State Zip Code	Last 4 digits of account number _____ \$503.00 When was the debt incurred? _____
As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.		
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another		
<input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Student loans <input type="checkbox"/> Yes <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Charge Account		
4.6 Comenity Bank/Roaman's Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125 Columbus, OH 43218 Number Street City State Zip Code		
Last 4 digits of account number _____ \$564.00 When was the debt incurred? _____		
As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.		
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another		
<input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Student loans <input type="checkbox"/> Yes <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Charge Account		
4.7 Fingerhut Fetti/Webbank Nonpriority Creditor's Name Attn: Bankruptcy 6250 Ridgewood Road Saint Cloud, MN 56303 Number Street City State Zip Code		
Last 4 digits of account number _____ \$2,275.00 When was the debt incurred? _____		
As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.		
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another		
<input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Student loans <input type="checkbox"/> Yes <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Charge Account		

Debtor 1 **Steven Eugene Harrison**
Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

4.8

Mercury/FBT

Nonpriority Creditor's Name

Attn: Bankruptcy**Po Box 84064****Columbus, GA 31908**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number _____

\$3,669.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed
Type of NONPRIORITY unsecured claim:
 Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Credit Card** _____

4.9

Mission Lane LLC

Nonpriority Creditor's Name

Attn: Bankruptcy**P.O. Box 105286****Atlanta, GA 30348**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number _____

\$3,294.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed
Type of NONPRIORITY unsecured claim:
 Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Credit Card** _____

4.1
0**Navy Federal Credit Union**

Nonpriority Creditor's Name

PO Box 3700**Merrifield, VA 22119**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number _____

\$399.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed
Type of NONPRIORITY unsecured claim:
 Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **NSF, apprx.** _____

Debtor 1 **Steven Eugene Harrison**
Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

4.1
1**Notice Only Recipients**

Nonpriority Creditor's Name

Last 4 digits of account number _____

\$0.00

When was the debt incurred? _____

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt
Is the claim subject to offset?
 No
 Yes

As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed**Type of NONPRIORITY unsecured claim:**

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Credit Bureaus, Tax Agencies, and other**Notice Only Recipients** _____4.1
2**South State Bank**

Nonpriority Creditor's Name

**520 Gervais St
Columbia, SC 29201-3046**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt
Is the claim subject to offset?
 No
 Yes

Last 4 digits of account number _____

\$4.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed**Type of NONPRIORITY unsecured claim:**

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

NSF _____4.1
3**Synchrony Bank/Amazon**

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt
Is the claim subject to offset?
 No
 Yes

Last 4 digits of account number _____

\$1,026.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed**Type of NONPRIORITY unsecured claim:**

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Charge Account _____

Debtor 1 **Steven Eugene Harrison**
Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

4.1 4	Synchrony/PayPal Credit Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965064 Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ \$721.00 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card _____
4.1 5	U.S. Bankcorp Nonpriority Creditor's Name Attn: Bankruptcy 800 Nicollet Mall Minneapolis, MN 55402 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ \$940.00 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card _____
4.1 6	U.S. Bankcorp Nonpriority Creditor's Name Attn: Bankruptcy 800 Nicollet Mall Minneapolis, MN 55402 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ \$565.00 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card _____

Part 3: List Others to Be Notified About a Debt That You Already Listed

Debtor 1 **Steven Eugene Harrison**
Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known)

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

Amazon Corp
410 Terry Ave N
Seattle, WA 98109

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.13** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Ashley Stewart
300 Nixon Ln
Edison, NJ 08837-3831

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.4** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Avant
222 N. LaSalle St., Suite 1700
Chicago, IL 60601

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.1** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Capital One
1680 Capital One Drive
Mc Lean, VA 22102

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.2** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Capital One
1680 Capital One Drive
Mc Lean, VA 22102

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.3** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Comenity Bank Corp Headquarters
One Righter Parkway, Suite 100
Wilmington, DE 19803

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.6** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Community Bank Corp
2795 East Cottonwood Parkway,
Suite 100
Salt Lake City, UT 84121

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.5** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Community Bank Corp
2795 East Cottonwood Parkway,
Suite 100
Salt Lake City, UT 84121

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.4** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Equifax
PO Box 740256
Atlanta, GA 30374

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.11** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Experian
PO Box 4500
Allen, TX 75013

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.11** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Fingerhut
P.O. Box 166

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.7** of (Check one):

Part 1: Creditors with Priority Unsecured Claims

Debtor 1 **Steven Eugene Harrison**
Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

Newark, NJ 07101 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Internal Revenue Service
PO Box 7346
Philadelphia, PA 19101-7346

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.11** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Kingsize Corp. Office
One New York Plaza
New York, NY 10004

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.5** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Mercury/FBT
10 Burnett Ct STE 300
Durango, CO 81301-3613

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.8** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Mission Lane LLC
PO Box 105286
Atlanta, GA 30348-5286

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.9** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Paypal Credit Corp
2211 North First Street
San Jose, CA 95131

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.14** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Roaman's
2300 Southeastern Avenue
Indianapolis, IN 46201

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.6** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
SC Dept. of Revenue
PO Box 125
Columbia, SC 29214

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.11** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Synchrony Bank
950 Forrer Blvd
Dayton, OH 45420-1469

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.13** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Synchrony Bank
950 Forrer Blvd
Dayton, OH 45420-1469

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.14** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
TransUnion
Consumer Dispute Center
PO Box 2000
Crum Lynne, PA 19022

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.11** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
U.S. Bankcorp
101 California St Ste 130
San Francisco, CA 94111-5875

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.15** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 **Steven Eugene Harrison**
Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

Last 4 digits of account number

Name and Address

U.S. Bankcorp
101 California St Ste 130
San Francisco, CA 94111-5875

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.16** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

WebBank
Attn: Bankruptcy
215 State St Suite 1000
Salt Lake City, UT 84111

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.7** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Webbank/Avant
215 State St Suite 1000
Salt Lake City, UT 84111

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.1** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total Claim
Total claims from Part 1	6a. Domestic support obligations	6a. \$ 0.00
	6b. Taxes and certain other debts you owe the government	6b. \$ 0.00
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ 0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. \$ 0.00
6e. Total Priority. Add lines 6a through 6d.		6e. \$ 0.00
Total claims from Part 2	6f. Student loans	6f. \$ 0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ 0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ 0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. \$ 16,254.00
6j. Total Nonpriority. Add lines 6f through 6i.		6j. \$ 16,254.00

Fill in this information to identify your case:

Debtor 1	Steven Eugene Harrison		
	First Name	Middle Name	Last Name
Debtor 2	JoAnne Evelyn Harrison		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF SOUTH CAROLINA		
Case number (if known)			

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease			State what the contract or lease is for
Name, Number, Street, City, State and ZIP Code			
2.1	 Name Number Street City State ZIP Code		
2.2	 Name Number Street City State ZIP Code		
2.3	 Name Number Street City State ZIP Code		
2.4	 Name Number Street City State ZIP Code		
2.5	 Name Number Street City State ZIP Code		

Fill in this information to identify your case:

Debtor 1	Steven Eugene Harrison		
	First Name	Middle Name	Last Name
Debtor 2	JoAnne Evelyn Harrison		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF SOUTH CAROLINA		
Case number (if known)			

Check if this is an amended filing

Official Form 106H Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Name, Number, Street, City, State and ZIP Code

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

Name

Number Street State ZIP Code

Schedule D, line _____

Schedule E/F, line _____

Schedule G, line _____

3.2

Name

Number Street State ZIP Code

Schedule D, line _____

Schedule E/F, line _____

Schedule G, line _____

Fill in this information to identify your case:

Debtor 1	<u>Steven Eugene Harrison</u>
Debtor 2 (Spouse, if filing)	<u>JoAnne Evelyn Harrison</u>
United States Bankruptcy Court for the:	<u>DISTRICT OF SOUTH CAROLINA</u>
Case number (if known)	

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	<input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not employed
Occupation	<u>Retired</u>	<u>Retired</u>
Employer's name		
Employer's address		

How long employed there? _____

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <u>0.00</u>	\$ <u>0.00</u>
3. Estimate and list monthly overtime pay.	3. +\$ <u>0.00</u>	+\$ <u>0.00</u>
4. Calculate gross Income. Add line 2 + line 3.	4. \$ <u>0.00</u>	\$ <u>0.00</u>

Debtor 1 **Steven Eugene Harrison**
 Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

Copy line 4 here	For Debtor 1	For Debtor 2 or non-filing spouse
4. _____	\$ 0.00	\$ 0.00
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 0.00	\$ 0.00
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 0.00
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00
5e. Insurance	5e. \$ 0.00	\$ 0.00
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 0.00	\$ 0.00
5h. Other deductions. Specify: _____	5h.+ \$ 0.00	+ \$ 0.00
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.		
6. _____	\$ 0.00	\$ 0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.		
7. _____	\$ 0.00	\$ 0.00
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ 0.00
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00
8e. Social Security	8e. \$ 1,333.00	\$ 1,027.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ 0.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 0.00	\$ 180.00
8h. Other monthly income. Specify: <u>VA Benefits</u> <u>Navy Retirement</u>	8h.+ \$ 339.00	+ \$ 0.00
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	\$ 3,192.00	\$ 1,207.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		
10. \$ 3,192.00 + \$ 1,207.00 = \$ 4,399.00		
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____		
11. +\$ 0.00		
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies		
12. \$ 4,399.00		
Combined monthly income		

Debtor 1 **Steven Eugene Harrison**
Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

13. Do you expect an increase or decrease within the year after you file this form?

No.

Yes. Explain:

Husband Debtor receives \$1,508 in SS Benefits with \$174.70 deducted for medical for a total net benefit of \$1,333 which is reflect on line 8e.

Husband Debtor receives \$1987/mo of Navy Retirement with withholdings of \$130 and a VA Waiver of \$339 for a total net of \$1520 which is reflected on line 8h

Wife Debtor receives \$1,279 in SS Benefits with \$174.70 deducted for medical and \$77.30 deducted for taxes for a total net benefit of \$1,027 which is reflect on line 8e.

No expected changes of more than 10%.

Fill in this information to identify your case:

Debtor 1	Steven Eugene Harrison
Debtor 2	JoAnne Evelyn Harrison
(Spouse, if filing)	
United States Bankruptcy Court for the:	DISTRICT OF SOUTH CAROLINA
Case number (If known)	

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?

No

Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents? No

Do not list Debtor 1 and
Debtor 2.

Yes. Fill out this information for
each dependent.....

Dependent's relationship to
Debtor 1 or Debtor 2

Dependent's
age

Does dependent
live with you?

Do not state the
dependents names.

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

No
 Yes
 No
 Yes
 No
 Yes
 No
 Yes

3. Do your expenses include expenses of people other than yourself and your dependents? No Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ **934.00**

If not included in line 4:

4a. Real estate taxes
4b. Property, homeowner's, or renter's insurance
4c. Home maintenance, repair, and upkeep expenses
4d. Homeowner's association or condominium dues
5. Additional mortgage payments for your residence, such as home equity loans

4a. \$	0.00
4b. \$	0.00
4c. \$	100.00
4d. \$	0.00
5. \$	0.00

Debtor 1 **Steven Eugene Harrison**
 Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

6. Utilities:

6a. Electricity, heat, natural gas	6a. \$ <u>175.00</u>
6b. Water, sewer, garbage collection	6b. \$ <u>80.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <u>330.00</u>
6d. Other. Specify: _____	6d. \$ <u>0.00</u>

7. Food and housekeeping supplies

8. Childcare and children's education costs	8. \$ <u>0.00</u>
---	-------------------

9. Clothing, laundry, and dry cleaning

10. Personal care products and services	10. \$ <u>140.00</u>
---	----------------------

11. Medical and dental expenses

12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	11. \$ <u>75.00</u>
--	---------------------

13. Entertainment, clubs, recreation, newspapers, magazines, and books	12. \$ <u>330.00</u>
--	----------------------

14. Charitable contributions and religious donations

15. Insurance.	13. \$ <u>270.00</u>
----------------	----------------------

Do not include insurance deducted from your pay or included in lines 4 or 20.

15a. Life insurance	15a. \$ <u>120.00</u>
15b. Health insurance	15b. \$ <u>45.00</u>
15c. Vehicle insurance	15c. \$ <u>130.00</u>
15d. Other insurance. Specify: Pet Insurance	15d. \$ <u>170.00</u>

16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.

Specify: **Vehicle property taxes, apprx.**

16. \$ <u>5.00</u>

17. Installment or lease payments:

17a. Car payments for Vehicle 1	17a. \$ <u>0.00</u>
17b. Car payments for Vehicle 2	17b. \$ <u>0.00</u>
17c. Other. Specify: _____	17c. \$ <u>0.00</u>
17d. Other. Specify: _____	17d. \$ <u>0.00</u>

18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).

19. Other payments you make to support others who do not live with you.	18. \$ <u>0.00</u>
---	--------------------

Specify: _____

19. \$ <u>0.00</u>

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

20a. Mortgages on other property	20a. \$ <u>0.00</u>
20b. Real estate taxes	20b. \$ <u>0.00</u>
20c. Property, homeowner's, or renter's insurance	20c. \$ <u>0.00</u>
20d. Maintenance, repair, and upkeep expenses	20d. \$ <u>0.00</u>
20e. Homeowner's association or condominium dues	20e. \$ <u>0.00</u>

21. Other: Specify: _____

21. +\$ <u>0.00</u>

22. Calculate your monthly expenses

22a. Add lines 4 through 21.	\$ <u>3,654.00</u>
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$ <u>3,654.00</u>
22c. Add line 22a and 22b. The result is your monthly expenses.	\$ <u>3,654.00</u>

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$ <u>4,399.00</u>
23b. Copy your monthly expenses from line 22c above.	23b. -\$ <u>3,654.00</u>

23c. Subtract your monthly expenses from your monthly income.
The result is your *monthly net income*.

23c. \$ <u>745.00</u>

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here: **No expected changes of more than 10%.**

Fill in this information to identify your case:

Debtor 1	Steven Eugene Harrison		
	First Name	Middle Name	Last Name
Debtor 2	JoAnne Evelyn Harrison		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF SOUTH CAROLINA		
Case number (if known)			

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

/s/ Steven Eugene Harrison

Steven Eugene Harrison

Signature of Debtor 1

Date August 15, 2024

/s/ JoAnne Evelyn Harrison

JoAnne Evelyn Harrison

Signature of Debtor 2

Date August 15, 2024

Fill in this information to identify your case:

Debtor 1	Steven Eugene Harrison		
	First Name	Middle Name	Last Name
Debtor 2	JoAnne Evelyn Harrison		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF SOUTH CAROLINA		
Case number (if known)			

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

Married
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

No
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:

Dates Debtor 1
lived there

Debtor 2 Prior Address:

Dates Debtor 2
lived there

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)

No
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Part 2 Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No
 Yes. Fill in the details.

Debtor 1	Gross income (before deductions and exclusions)	Debtor 2	Gross income (before deductions and exclusions)
Sources of income Check all that apply.		Sources of income Check all that apply.	

Debtor 1 **Steven Eugene Harrison**
Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No
 Yes. Fill in the details.

	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Social Security Benefits	\$12,064.00	Social Security Benefits	\$10,232.00
	VA Disability, apprx.	\$2,712.00		
	Wife Pension, apprx.	\$1,440.00		
	Navy Retirement Income	\$15,896.00		
	Wife Pension, apprx.	\$2,160.00		
For last calendar year: (January 1 to December 31, 2023)	Social Security Benefits	\$17,531.00	Social Security Benefits	\$14,867.00
	VA Disability, apprx.	\$4,068.00		
	Wife Pension, apprx.	\$2,160.00		
	Navy Retirement, apprx	\$18,240.00		
For the calendar year before that: (January 1 to December 31, 2022)	Social Security Benefits	\$16,130.00	Social Security Benefits	\$13,681.00
	VA Disability, apprx.	\$4,068.00		
	Navy Retirement, apprx.	\$18,240.00		

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575* or more?

No. Go to line 7.
 Yes List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.

Debtor 1 **Steven Eugene Harrison**
Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

■ Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

 No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...
PennyMac 6101 Condor Drive Moorpark, CA 93021	Last 3 months, regular payments, apprx.	\$2,799.00	\$80,000.00	<input checked="" type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

 No Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
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8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

 No Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
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Part 4: Identify Legal Actions, Repossessions, and Foreclosures**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

 No Yes. Fill in the details.

Case title Case number	Nature of the case	Court or agency	Status of the case
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10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

 No. Go to line 11. Yes. Fill in the information below.

Creditor Name and Address	Describe the Property Explain what happened	Date	Value of the property
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Debtor 1 **Steven Eugene Harrison**
 Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No
 Yes. Fill in the details.

Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
---------------------------	---------------------------------------	-----------------------	--------

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No
 Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No
 Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift and Address:			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No
 Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
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Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No
 Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
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Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No
 Yes. Fill in the details.

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
The Law Office of Lauren Clark 925 D Wappo Rd. Charleston, SC 29407	\$500 Attorney Fees, plus costs	Through August 2024	\$500.00

Debtor 1 **Steven Eugene Harrison**
Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?
Do not include any payment or transfer that you listed on line 16.

No
 Yes. Fill in the details.

Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
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18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No
 Yes. Fill in the details.

Person Who Received Transfer Address	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person's relationship to you			

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No
 Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date Transfer was made
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Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No
 Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
South State Bank	XXXX-	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input checked="" type="checkbox"/> Other <u>2</u> <u>Checking Accounts</u>	Final balance \$0 and one was negative (see Sch F); August 2024 closed	\$0.00

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No
 Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
---	--	-----------------------	-----------------------

Debtor 1 **Steven Eugene Harrison**
 Debtor 2 **JoAnne Evelyn Harrison**

Case number (*if known*)

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No
 Yes. Fill in the details.

Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
--	---	-----------------------	-----------------------

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No
 Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
--	--	-----------------------	-------

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No
 Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
--	---	-----------------------------------	----------------

25. Have you notified any governmental unit of any release of hazardous material?

No
 Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
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26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No
 Yes. Fill in the details.

Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
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Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
 A member of a limited liability company (LLC) or limited liability partnership (LLP)

Debtor 1 **Steven Eugene Harrison**
Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

A partner in a partnership
 An officer, director, or managing executive of a corporation
 An owner of at least 5% of the voting or equity securities of a corporation
 No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Business Name
Address
(Number, Street, City, State and ZIP Code)

Describe the nature of the business

Name of accountant or bookkeeper

Employer Identification number
Do not include Social Security number or ITIN.

Dates business existed

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No
 Yes. Fill in the details below.

Name
Address
(Number, Street, City, State and ZIP Code)

Date Issued

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Steven Eugene Harrison

Steven Eugene Harrison
Signature of Debtor 1

/s/ JoAnne Evelyn Harrison

JoAnne Evelyn Harrison
Signature of Debtor 2

Date August 15, 2024

Date August 15, 2024

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

No
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No
 Yes. Name of Person _____. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:	
Debtor 1	Steven Eugene Harrison
Debtor 2 (Spouse, if filing)	JoAnne Evelyn Harrison
United States Bankruptcy Court for the: <u>District of South Carolina</u>	
Case number (if known)	

Check as directed in lines 17 and 21:	
According to the calculations required by this Statement:	
<input checked="" type="checkbox"/>	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
<input type="checkbox"/>	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
<input checked="" type="checkbox"/>	3. The commitment period is 3 years.
<input type="checkbox"/>	4. The commitment period is 5 years.

Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- What is your marital and filing status? Check one only.

Not married. Fill out Column A, lines 2-11.

Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ <u>0.00</u>	\$ <u>0.00</u>
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ <u>0.00</u>	\$ <u>0.00</u>
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.	\$ <u>0.00</u>	\$ <u>0.00</u>
5. Net income from operating a business, profession, or farm	Debtor 1	
Gross receipts (before all deductions)	\$ <u>0.00</u>	
Ordinary and necessary operating expenses	-\$ <u>0.00</u>	
Net monthly income from a business, profession, or farm	\$ <u>0.00</u>	Copy here -> \$ <u>0.00</u>
6. Net income from rental and other real property	Debtor 1	
Gross receipts (before all deductions)	\$ <u>0.00</u>	
Ordinary and necessary operating expenses	-\$ <u>0.00</u>	
Net monthly income from rental or other real property	\$ <u>0.00</u>	Copy here -> \$ <u>0.00</u>

Debtor 1 **Steven Eugene Harrison**
Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known) _____

7. Interest, dividends, and royalties

8. Unemployment compensation

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you \$ **0.00**
For your spouse \$ **0.00**

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

\$ **1,649.00** \$ **180.00**

10. Income from all other sources not listed above. Specify the source and amount.

Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

\$ **0.00** \$ **0.00**
\$ **0.00** \$ **0.00**
+ \$ **0.00** \$ **0.00**

Total amounts from separate pages, if any.

\$ **1,649.00** + \$ **180.00** = \$ **1,829.00**

Total average monthly income

Part 2: Determine How to Measure Your Deductions from Income

12. Copy your total average monthly income from line 11. \$ **1,829.00**

13. Calculate the marital adjustment. Check one:

You are not married. Fill in 0 below.
 You are married and your spouse is filing with you. Fill in 0 below.
 You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.

_____ \$ _____
_____ \$ _____
+ \$ _____
Total \$ **0.00** Copy here=> - **0.00**

14. Your current monthly income. Subtract line 13 from line 12.

\$ **1,829.00**

15. Calculate your current monthly income for the year. Follow these steps:

15a. Copy line 14 here=> \$ **1,829.00**

Debtor 1
Debtor 2

Steven Eugene Harrison
JoAnne Evelyn Harrison

Case number (if known)

Multiply line 15a by 12 (the number of months in a year).

x 12

15b. The result is your current monthly income for the year for this part of the form.

\$ **21,948.00**

16. Calculate the median family income that applies to you. Follow these steps:

16a. Fill in the state in which you live.

SC

16b. Fill in the number of people in your household.

2

16c. Fill in the median family income for your state and size of household.

\$ **74,874.00**

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

17. How do the lines compare?

17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3.** Do NOT fill out *Calculation of Your Disposable Income* (Official Form 122C-2).

17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2).** On line 39 of that form, copy your current monthly income from line 14 above.

Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)

18. **Copy your total average monthly income from line 11 .**

\$ **1,829.00**

19. **Deduct the marital adjustment if it applies.** If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.

19a. If the marital adjustment does not apply, fill in 0 on line 19a.

-\$ **0.00**

19b. **Subtract line 19a from line 18.**

\$ **1,829.00**

20. Calculate your current monthly income for the year. Follow these steps:

20a. Copy line 19b

\$ **1,829.00**

Multiply by 12 (the number of months in a year).

x 12

20b. The result is your current monthly income for the year for this part of the form

\$ **21,948.00**

20c. Copy the median family income for your state and size of household from line 16c

\$ **74,874.00**

21. How do the lines compare?

Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years*. Go to Part 4.

Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years*. Go to Part 4.

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/ Steven Eugene Harrison

Steven Eugene Harrison

Signature of Debtor 1

Date **August 15, 2024**

MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

X /s/ JoAnne Evelyn Harrison

JoAnne Evelyn Harrison

Signature of Debtor 2

Date **August 15, 2024**

MM / DD / YYYY

Debtor 1
Debtor 2

Steven Eugene Harrison
JoAnne Evelyn Harrison

Case number (if known) _____

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Debtor 1 **Steven Eugene Harrison**
Debtor 2 **JoAnne Evelyn Harrison**

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 02/01/2024 to 07/31/2024.

Line 9 - Pension and retirement income

Source of Income: **Navy Retirement**

Income by Month:

6 Months Ago:	02/2024	\$1,649.00
5 Months Ago:	03/2024	\$1,649.00
4 Months Ago:	04/2024	\$1,649.00
3 Months Ago:	05/2024	\$1,649.00
2 Months Ago:	06/2024	\$1,649.00
Last Month:	07/2024	\$1,649.00
Average per month:		\$1,649.00

Non-CMI - VA Income

Source of Income: **VA Benefits**

Income by Month:

6 Months Ago:	02/2024	\$339.00
5 Months Ago:	03/2024	\$339.00
4 Months Ago:	04/2024	\$339.00
3 Months Ago:	05/2024	\$339.00
2 Months Ago:	06/2024	\$339.00
Last Month:	07/2024	\$339.00
Average per month:		\$339.00

Non-CMI - Social Security Act Income

Source of Income: **SS Benefits**

Income by Month:

6 Months Ago:	02/2024	\$1,508.00
5 Months Ago:	03/2024	\$1,508.00
4 Months Ago:	04/2024	\$1,508.00
3 Months Ago:	05/2024	\$1,508.00
2 Months Ago:	06/2024	\$1,508.00
Last Month:	07/2024	\$1,508.00
Average per month:		\$1,508.00

Debtor 1
Debtor 2

Steven Eugene Harrison
JoAnne Evelyn Harrison

Case number (if known)

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period **02/01/2024** to **07/31/2024**.

Line 9 - Pension and retirement income

Source of Income: **Pension**

Income by Month:

6 Months Ago:	02/2024	\$180.00
5 Months Ago:	03/2024	\$180.00
4 Months Ago:	04/2024	\$180.00
3 Months Ago:	05/2024	\$180.00
2 Months Ago:	06/2024	\$180.00
Last Month:	07/2024	\$180.00
Average per month:		\$180.00

Non-CMI - Social Security Act Income

Source of Income: **SS Benefits**

Income by Month:

6 Months Ago:	02/2024	\$1,279.00
5 Months Ago:	03/2024	\$1,279.00
4 Months Ago:	04/2024	\$1,279.00
3 Months Ago:	05/2024	\$1,279.00
2 Months Ago:	06/2024	\$1,279.00
Last Month:	07/2024	\$1,279.00
Average per month:		\$1,279.00

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

\$245 filing fee

\$78 administrative fee

+ \$15 trustee surcharge

\$338 total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167	filings fee
+ \$571	administrative fee
\$1,738 total fee	

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	<u>administrative fee</u>
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	<u>administrative fee</u>
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

<http://www.uscourts.gov/forms/bankruptcy-forms>

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses>.

In Alabama and North Carolina, go to:

<http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

**United States Bankruptcy Court
District of South Carolina**

In re **Steven Eugene Harrison
JoAnne Evelyn Harrison**

Debtor(s)

Case No.

Chapter

13

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$ 4,300.00
Prior to the filing of this statement I have received	\$ 500.00
Balance Due	\$ 3,800.00

2. The source of the compensation paid to me was:

Debtor Other (specify):

3. The source of compensation to be paid to me is:

Debtor Other (specify):

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- [Other provisions as needed]

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

August 15, 2024

Date

/s/ Lauren Clark

Lauren Clark 10601

Signature of Attorney

Law Office of Lauren Clark

925 D Wappoo Rd

Charleston, SC 29407

803-386-8868 Fax: 866-390-0669

laurenclarklaw@aol.com

Name of law firm



LAW OFFICE OF LAUREN CLARK, L.L.C.

925D Wappoo Rd • Charleston, SC 29407
Telephone: (803)386-8868 • Email: laurenclarklaw@aol.com
www.laurenclarklaw.com

REPRESENTATION AND FEE AGREEMENT

THIS AGREEMENT is made by and between: THE LAW OFFICE OF LAUREN CLARK, LLC, ("Attorney"), and Steven & Jolene Harrison ("Client").

ONE: Client hereby retains and employs Attorney to represent him/her in:

Chapter 7 Bankruptcy

Chapter 13 Bankruptcy

Other

Client agrees that Attorney has been engaged only for the above matter and no other matters unless agreed to in writing.

I have read and understand this paragraph of the agreement.

Initial Below:

TWO: CLIENT RESPONSIBILITIES.

Client must fully cooperate with Attorney and provide all information relevant to the issues involved in this matter.

Client agrees that the only creditors filed are the ones listed on the bankruptcy schedules signed by Client. Any additions must be made within 90 days of filing.

Attorney is not responsible for judgments not disclosed by Client.

Chapter 13 Clients must file all unfiled tax returns before filing if possible, but no later than 30 days after case is filed.

Client may be responsible for paying certain debts directly to creditors; failure to do so can result in loss of property. After filing, mortgage and car lenders often stop sending statements and taking online payments. Make a copy of your bill prior to filing so you know where to make payments.

Client must continue making all alimony, child support, and domestic support obligations.

Client shall immediately notify attorney of any letter during case requesting reply. Attorney is not liable for not answering letter if Client does not call attorney.

Client is responsible for completing two credit counseling courses, one prior to filing, and one prior to discharge.

I have read and understand this paragraph of the agreement.

Initial Below:

THREE: NO GUARANTEE.

Attorney agrees to provide conscientious, competent and diligent services at all times and will seek to achieve solutions which are just and reasonable for Client.

However, because of the uncertainty of legal proceedings, the interpretation and changes in the law and many unknown factors, Attorney cannot and does not warrant, predict or guarantee results or the final outcome of any case.

Client understands that bankruptcy law changes may affect Client's case and may prevent Client from filing if changes occur before the case is filed.

FOUR: Power Of Attorney

Client empowers Attorney to take all legal action and to provide all legal services deemed necessary and advisable by Attorney in this matter, including obtaining credit reports.

Attorney may associate other counsel as deemed necessary.

I have read and understand this paragraph of the agreement.

Initial Below:

I have read and understand this paragraph of the agreement.

Initial Below:

FIVE: COMMUNICATIONS POLICY

Attorney responds to clients in order of priority. Emergencies are handled first. Please allow adequate time for a response, which typically may take 48 hours or longer, depending on the request, and attorney's schedule. Messages left on weekends or holidays require a longer response time.

Client understands that attorney and staff are not always available to take phone calls, and that calling repetitively may disrupt other calls, meetings or court hearings. Client agrees not to call more than two times in a 24 hour period.

If Client calls and no one is available to answer, client will leave a detailed message and allow Attorney and staff time to respond.

When leaving a message or sending an email, Client should leave a detailed request so attorney and staff can determine the nature and urgency of the issue.

All communication with attorney will be through either phone calls to our office line, text messages to our office line, or emails to our office emails. Client understands that attorney does not check personal or business social media accounts for correspondence.

Client understands that many requests require scheduling an appointment to discuss.

If attorney is unavailable, Client should speak with staff, who can answer many questions, and relay information to Attorney.

Attorney charges additional fees for excessive calls/emails, as to be determined by this policy as well as the discretion of attorney.

I have read and understand this paragraph of the agreement.

Initial Below:

PROFESSIONAL FEES and COSTS (FOR BASIC CASE)

Attorney Fee shall be the sum of:	
Basic Cost: Credit Report Fees \$45 Individual, \$90 Joint:	\$ 4300
Bankruptcy Court Filing Fee: Ch. 7 (\$338); Ch. 13 (\$313)	\$ 90
TOTAL ATTORNEY, COSTS AND FILING FEES FOR BASIC CASE (if paid by cash, check, or money order):	\$ 313
TOTAL ATTORNEY, COSTS AND FILING FEES FOR BASIC CASE IF FEES ARE PAID BY DEBIT CARD, OR IF THEY ARE PAID BY THIRD PARTY USING CREDIT CARD (5% added to total for costs of Merchant Terminal.	\$ 4703
Payment plans require auto-draft on debit card.	\$ 4938.15
CLIENT UNDERSTANDS THAT NO BANKRUPTCY FEES CAN BE CHARGED ON CLIENT'S CREDIT CARD (DEBIT CARD ONLY):	

ALL ATTORNEY, COSTS, AND FILING FEES MUST BE PAID AS LISTED BELOW.

ATTORNEY BEGINS WORK ON FILE IMMEDIATELY WHEN FUNDS ARE RECEIVED.

FEES FOR BASIC CASE ARE "FLAT FEES", AND THUS ARE CONSIDERED EARNED IMMEDIATELY UPON RECEIPT, AND CLIENT AGREES THAT PAYMENT OF ANY PORTION OF THE FLAT FEE IS NON-REFUNDABLE, IN WHOLE, OR IN PART, FOR ANY REASON.

ATTORNEY CHARGES A \$50 FEE FOR RETURNED CHECKS OR DEBITS.

CHAPTER 7

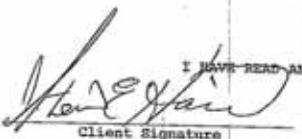
	Cash/Check	Debit/Credit
TOTAL ATTORNEY, COSTS AND FILING FEES:	\$	\$
MINIMUM RETAINER FEE:	\$	\$

CHAPTER 13

	Cash/ Check	Debit/Credit
TOTAL ATTORNEY, COSTS AND FILING FEES:	\$ 4703	\$ 4938.15
MINIMUM FEE REQUIRED TO FILE:	\$ 903	\$ 948.15
EST BALANCE DUE TO BE PAID BY TRUSTEE IN CH. 13 PLAN (may be adjusted):	\$ 3800	\$ N/A

There are no additional fees for the basic case, unless additional services/costs become necessary beyond the basic case as explained below, or as contained in a written supplemental fee schedule; however, there will be an additional charge of at least \$500 if any property is repossessed and client wants to regain possession, or client fails to pay in full and/or fails to provide all requested information within ten (10) business days of a foreclosure sale.

I HAVE READ AND UNDERSTAND THIS PAGE OF THE AGREEMENT:


Client Signature


Client Signature

PAYMENT PLAN:

Our firm offers a payment plan towards fees require to file. If Client chooses a payment arrangement, payments will be drafted automatically from Client's bank account, as set forth below.

Check the adjacent box to indicate Client wishes to make payments pursuant to the below stated payment arrangement. Client must also fill out and return the Debit Card Authorization form with this agreement in order to be enrolled in the payment plan.

A monthly payment of One hundred Fifty Eight dollars and 03/100 \$158.03 per month is acknowledged and will be drafted from Debtor's bank account on the 20 of each Month beginning in 20 and continuing for Six (6) total consecutive months.

If Client is paying monthly payments toward the filing, Client agrees that if payments are not made in accordance with the above stated agreement, Attorney may close Client's file without further notice to Client and take no further action in Client's case and Client understands and agrees that there are no refunds given, regardless of whether the bankruptcy petition is ever filed.

Attorney shall have no responsibility or obligation to file the case until required attorney fees, costs, and filing fees have been provided by client. Attorney does not offer to provide services or accept case until all payments and documents are provided.

If Client needs or desires to file the case before the term of the payment arrangement expires, Client must contact our office immediately to cancel the automatic draft and to pay the remainder of the fees required to file.

I HAVE READ AND UNDERSTAND THIS PAGE OF THE AGREEMENT:


Client Signature


Client Signature

SIX: For the above-stated fees, Attorney agrees to consult with Client in order to analyze case, prepare and file petition for relief and schedules if appropriate, prosecute any lien avoid or value motions (ch. 13 only), attend the first meeting of creditors and confirmation hearings (if necessary), and consult with Client for one follow up advisory conference.

All representation ends upon the earlier of: withdrawal by Attorney due to non-payment or non-cooperation by client, futility, or discharge/dismissal of bankruptcy case.

I have read and understand this paragraph of the agreement.

Initial Below:



SEVEN: The fee will NOT include any representation other than listed above, including, but not limited to, credit-bureau reporting issues, revisions to schedules due to outdated or incorrect information provided by client, amendments, Rule 2004 hearings, motions to modify the automatic stay, any objections, motions to dismiss or convert, adversary proceedings, modification of plan, release of property motion, moratorium, audits, trials or appeals.

Fees for these additional services not included in the basic fee require an additional retainer to be paid and will be billed to Client at \$250.00 per hour for all time spent in negotiation or pursuing the objectives of Client, and for all other time (such as conferences, telephone calls, preparing legal papers and letters, gathering or reviewing evidence, legal research, etc.) and \$300.00 per hour for all court hearings.

If additional services are necessary, Client agrees to pay Attorney a retainer in the amount determined by Attorney, and Client has no expectation of Attorney's representation in these additional matters until Client has paid an additional retainer.

Client understands that additional work for problems or matters that arise after filing may require an appointment. Any additional work as well as fees will be discussed then.

Client agrees that in Chapter 13 cases, Attorney may file supplemental fee applications for work performed and services rendered beyond the basic retainer, so that the fee is added to Client's Chapter 13 plan. Client understands that in some circumstances, this may result in an increase in Chapter 13 plan payments. Attorney will notify client if a supplemental fee application will increase Client's Chapter 13 plan payment.

Extraordinary expenses such as long distance, copies (including making copies of client's file to give to client), mileage, facsimile and postage charges may be added to Client's bill at Attorney's discretion.

Client agrees to file retrieval costs.

Attorney shall be entitled to all fees earned and costs incurred to date notwithstanding said discharge by Client.

EIGHT: If any portion of attorney's fees and costs are not paid directly or in full within the Client's Chapter 13 plan, Client agrees to remit any remaining unpaid balance within thirty (30) days without regard to whether a statement has been sent. Balances not paid within 30 days shall incur a late charge of 1 1/8 per month on the balance owed and case may be subject to termination.

Client agrees to pay all outstanding fees and/or costs before Attorney releases file to Client, should Client desire to retrieve file.

In event of dismissal from Chapter 13, all remaining attorney fees are immediately payable and fully earned. If a Chapter 13 case is converted to Chapter 7, any remaining fees will survive discharge. Any money held by trustee is payable to attorney for services.

Payment of all costs and fees shall be made before Attorney releases file.

NINE: Client understands that this agreement is based upon assumption that Client has fully disclosed all relevant information and has not omitted or concealed any material fact.

Client understands that Attorney cannot fully advise Client without full knowledge of Client's situation.

Client agrees that Attorney shall not be responsible for any repossessions and/or foreclosures which occur before or after the filing of the case.

Client understands that any deliberate and/or grossly negligent failure to disclose relevant information or concealment may constitute grounds for Attorney to withdraw from representing Client, and furthermore, may subject Client to civil and/or criminal sanctions.

Attorney may in his/her absolute discretion or allowable under the Rules of Professional Conduct withdraw from representing Client at any time upon written notice.

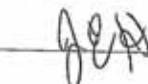
Client may discharge Attorney at any time by written notice.

Attorney's proposals regarding tax debt discharge are based on information provided by Client. Fees charged for the basic case do not include tax discharge analysis. Client waives any liability of Attorney in representations regarding tax dischargeability.

TEN: Client shall immediately notify Attorney of any change of address, telephone number, or change in employment throughout the representation, and shall attend all required hearings.

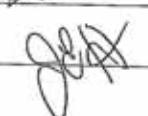
I have read and understand this paragraph of the agreement.

Initial Below:



I have read and understand this paragraph of the agreement.

Initial Below:



I have read and understand this paragraph of the agreement.

Initial Below:



ELEVEN: Client agrees that any breach of this Agreement will permit Attorney to withdraw.

Client consents to allowing Attorney to withdraw if the case is joint and the married couple separates at any time during the bankruptcy.

Client agrees that Client's file has been abandoned and the attorney/client relationship has ended if the Client does not respond to calls, emails, texts, or letters for 2 consecutive months. No fees will be returned.

If Client's case is not filed within 60 days of payment of the initial fee required to file (due to delay on Client's part or failure to provide documents), any fees paid will be forfeited and Attorney will no longer take phone calls from creditors, and will terminate representation. No refunds will be given. A new representation agreement will be required.

CLIENT WILL NOT PROVIDE ORIGINAL DOCUMENTS TO ATTORNEY, AND WILL ONLY PROVIDE COPIES. CLIENT CONSENTS TO ANY DOCUMENTS BEING DESTROYED BY ATTORNEY. CLIENT'S FILE MAY BE STORED ELECTRONICALLY.

CLIENT CONSENTS TO FILE BEING DESTROYED WITHIN ONE YEAR AFTER THE FILE IS CLOSED. FILE IS CLOSED EITHER UPON THE EARLIER- DISMISSAL, DISCHARGE, FUTILITY, OR NON-PAYMENT.

CLIENT WILL NOT PROVIDE CREDITORS WITH ATTORNEY'S MAIN PHONE NUMBER. FOR CLIENTS ON A PAYMENT PLAN, ATTORNEY WILL PROVIDE A SEPARATE PHONE NUMBER FOR CREDITOR CALLS. CREDITOR CALLS TO OUR MAIN OFFICE NUMBER WILL BE RILLED AT \$25 PER CALL.

CLIENT UNDERSTANDS THAT ATTORNEY CANNOT PREPARE/FILE THE CASE UNTIL CLIENT PROVIDES ALL REQUIRED INFORMATION AND PAYS REQUIRED FEES. AFTER CLIENT SUBMITS ALL INFORMATION AND PAYS ALL REQUIRED FEES, IT MAY TAKE FROM 5 TO 10 BUSINESS DAYS OR MORE TO HAVE ALL DOCUMENTS READY TO FILE.

CLIENT UNDERSTANDS THAT THERE IS NO BANKRUPTCY PROTECTION FROM CREDITORS UNTIL THE CASE HAS ACTUALLY BEEN FILED. DURING THE TIME THAT THE CASE IS BEING PREPARED FOR FILING CREDITORS MAY REPOSSESS AND/OR FORECLOSE PROPERTY.

CLIENT AGREES THAT NO REFUNDS ARE GIVEN FOR ANY ATTORNEY FEES/COSTS.

ALL MINIMUM FEES REQUIRED TO FILE MUST BE PAID NO LATER THAN TEN (10) BUSINESS DAYS PRIOR TO ANY FORECLOSURE SALE OR PRIOR TO ANY REPOSSESSION OF PERSONAL PROPERTY OR ADDITIONAL RUSH FEES OF AT LEAST \$500 OR MORE WILL BE REQUIRED AT ATTORNEY'S SOLE DISCRETION.

I HAVE READ AND BEEN PROVIDED WITH A COPY OF THE ABOVE ATTORNEY REPRESENTATION AND FEE AGREEMENT AND UNDERSTAND ITS TERMS.

THERE ARE NO OTHER AGREEMENTS, ORAL OR OTHERWISE, BETWEEN CLIENT AND ATTORNEY, UNLESS REDUCED TO WRITING.

THIS REPRESENTATION AGREEMENT SHALL BE VOID IF NOT EXECUTED BY THE PARTIES WITHIN 6 MONTHS OF THE OFFER OF REPRESENTATION. A NEW ANALYSIS AND REPRESENTATION OFFER MUST BE MADE AFTER THIS REPRESENTATION AGREEMENT EXPIRES.

BY MY SIGNATURE BELOW, I AGREE TO BE BOUND BY ITS TERMS.

DATED _____, 20____

CLIENT

Jeffrey C. Harrison

I have read and understand this paragraph of the agreement.

Initial Below:

Jeffrey C. Harrison

Jeffrey C. Harrison

SUPPLEMENTAL FEE SCHEDULE

The following are normal fees for extra services that may arise during a bankruptcy. These services are NOT normally required in the typical case, and will require extra fees because of the extra work required. Additionally, special circumstances may make it necessary to charge even a higher fee than listed below because of extra work that may be required. These fees could be adjusted by the Bankruptcy Court. All administrative costs (filing fees, postage, copies, mileage, long distance telephone charges, etc.) will be added to the fees below.

NOTE: IT IS REQUESTED THAT THESE FEES ARE PAYABLE IN ADVANCE OF THE SERVICES RENDERED.

Description	Amount
Rescheduling of Creditor's Meeting due to client's failure to attend	\$300.00
Adding a creditor after Petition has been filed (+court fee)	\$250.00
Filing a motion for a payment moratorium (add \$150 if hearing required)	\$500.00
Filing a motion to sell property (add \$150 if hearing required)	\$500.00
Filing a motion to incur secured debt (add \$150 if hearing required)	\$500.00
Filing a motion to abandon property (add \$150 if hearing required)	\$500.00
Filing a modified plan and/or budget due to lifting of the stay, sale/surrender of an asset or to reduce payments because clients circumstances have changed or due to omitted or incorrect information provided by client.	\$500.00
Objecting to proof of claim (add \$150 if hearing required)	\$500.00
Defending any motion to dismiss by Trustee (add \$150 if hearing)	\$500.00
Defending any motion to Dismiss by any Creditor (add \$150 if hearing)	\$500.00
Filing a motion to reconsider after Order of Dismissal	\$500.00
Attending a "3 rd " Debtor's Examination	\$900.00
Attending any contested Court Hearing other than Confirmation	\$500.00
Defending a motion to lift the Stay (bankruptcy protection) due to failure to make payments outside the plan or failing to keep insurance on home or car (add \$150.00 if hearing required)	\$600.00
Filing a motion to modify Stay	\$500.00
Filing a motion to avoid a judicial lien (ch. 8)	\$500.00
Filing a motion to reconsider after Default on I93 Consent Order	\$500.00
Filing a motion to divide a joint case	\$500.00
Filing a motion to convert from Chapter 7 to 13	\$1500.00
Filing a motion to convert from Chapter 13 to 7 (+balance of Chapter 13 fees owed)	\$1500.00
Filing a motion for hardship discharge	\$600.00
Filing a motion to allow a late filing claim	\$500.00
Filing the certificate of debtor education	\$100.00
Filing a motion for voluntary dismissal	\$500.00
Filing or defending an adversary proceeding (no guarantee that we will file or defend adversary, decided on a case by case basis) (Retainer + \$250.00/hr)	\$TBD

Defending litigation files against client for allegations of fraud. Appeals from any Court decision, and handling any post-discharge/post-dismissal matters, and enforcing the automatic stay.(Retainer + \$250.00/hr.)

STBD

Extended negotiations by attorney on behalf of the client (or audit)	\$200.00/hr
Failure to keep any appointment with attorney unless client cancels 34 hours in advance	\$200.00
Showing up to the office without an appointment	\$150.00
Excessive phone calls, emails and/or letters to/from client	\$100.00
Any other extra work required that is not typical (out of court)	\$250.00/hr
Any other extra work required that is not typical (in court)	\$300.00/hr
Mortgage Modification through DMM/Portal	\$1700

THE ABOVE FEES HAVE BEEN EXPLAINED TO ME AND I HAVE RECEIVED A COPY OF THIS FEE SCHEDULE. I UNDERSTAND THAT THESE FEES ARE SUBJECT TO CHANGE, AND BY MY SIGNATURE I (WE) CONSENT TO THE FILING OF SUPPLEMENTAL CLAIMS IN THE PLAN TO PROVIDE FOR THESE FEES IF NOT PAID IN ADVANCE.

/s/

Client's Signature



LOCAL OFFICIAL FORM 1007-1(b) TO SC LBR 1007-1

United States Bankruptcy Court
District of South Carolina

In re **Steven Eugene Harrison**
JoAnne Evelyn Harrison

Debtor(s)

Case No.

Chapter

13

CERTIFICATION VERIFYING CREDITOR MATRIX

The above named debtor, or attorney for the debtor if applicable, hereby certifies pursuant to South Carolina Local Bankruptcy Rule 1007-1 that the master mailing list of creditors submitted either on computer diskette, electronically filed via CM/ECF, or conventionally filed in a typed hard copy scannable format which has been compared to, and contains identical information to, the debtor's schedules, statements and lists which are being filed at this time or as they currently exist in draft form.

Master mailing list of creditors submitted via:

(a) computer diskette
(b) scannable hard copy
(number of sheets submitted)
(c) electronic version filed via CM/ECF

Date: **August 15, 2024**

/s/ Steven Eugene Harrison

Steven Eugene Harrison

Signature of Debtor

/s/ JoAnne Evelyn Harrison

JoAnne Evelyn Harrison

Signature of Debtor

Date: **August 15, 2024**

/s/ Lauren Clark

Signature of Attorney

Lauren Clark

Law Office of Lauren Clark

925 D Wappoo Rd

Charleston, SC 29407

803-386-8868

Typed/Printed Name/Address/Telephone

10601 SC

District Court I.D. Number

AMAZON CORP
410 TERRY AVE N
SEATTLE WA 98109

ASHLEY STEWART
300 NIXON LN
EDISON NJ 08837-3831

AVANT
222 N. LASALLE ST., SUITE 1700
CHICAGO IL 60601

AVANT/WEBBANK
222 NORTH LASALLE STREET
SUITE 1600
CHICAGO IL 60601

CAPITAL ONE
ATTN: BANKRUPTCY
PO BOX 30285
SALT LAKE CITY UT 84130

CAPITAL ONE
1680 CAPITAL ONE DRIVE
MC LEAN VA 22102

COMENITY BANK CORP HEADQUARTERS
ONE RIGHTER PARKWAY, SUITE 100
WILMINGTON DE 19803

COMENITY BANK/ASHLEY STEWART
ATTN: BANKRUPTCY
PO BOX 182125
COLUMBUS OH 43218

COMENITY BANK/KINGSIZE
ATTN: BANKRUPTCY
PO BOX 182125
COLUMBUS OH 43218

COMENITY BANK/ROAMAN'S
ATTN: BANKRUPTCY
PO BOX 182125
COLUMBUS OH 43218

COMMENITY BANK CORP
2795 EAST COTTONWOOD PARKWAY,
SUITE 100
SALT LAKE CITY UT 84121

EQUIFAX
PO BOX 740256
ATLANTA GA 30374

EXPERIAN
PO BOX 4500
ALLEN TX 75013

FINGERHUT
P.O. BOX 166
NEWARK NJ 07101

FINGERHUT FETTI/WEBBANK
ATTN: BANKRUPTCY
6250 RIDGEWOOD ROAD
SAINT CLOUD MN 56303

INTERNAL REVENUE SERVICE
PO BOX 7346
PHILADELPHIA PA 19101-7346

KINGSIZE CORP. OFFICE
ONE NEW YORK PLAZA
NEW YORK NY 10004

MERCURY/FBT
ATTN: BANKRUPTCY
PO BOX 84064
COLUMBUS GA 31908

MERCURY/FBT
10 BURNETT CT STE 300
DURANGO CO 81301-3613

MISSION LANE LLC
ATTN: BANKRUPTCY
P.O. BOX 105286
ATLANTA GA 30348

MISSION LANE LLC
PO BOX 105286
ATLANTA GA 30348-5286

NAVY FEDERAL CREDIT UNION
PO BOX 3700
MERRIFIELD VA 22119

NOTICE ONLY RECIPIENTS

PAYPAL CREDIT CORP
2211 NORTH FIRST STREET
SAN JOSE CA 95131

PENMAC
PO BOX 514387
LOS ANGELES CA 90051

PENNYMAC
6101 CONDOR DRIVE
MOORPARK CA 93021

PENNYMAC
3043 TOWNSGATE RD STE 200
WESTLAKE VILLAGE CA 91361-3027

ROAMAN'S
2300 SOUTHEASTERN AVENUE
INDIANAPOLIS IN 46201

SC DEPT. OF REVENUE
PO BOX 125
COLUMBIA SC 29214

SOUTH STATE BANK
520 GERVAIS ST
COLUMBIA SC 29201-3046

SYNCHRONY BANK
950 FORRER BLVD
DAYTON OH 45420-1469

SYNCHRONY BANK/AMAZON
ATTN: BANKRUPTCY
PO BOX 965060
ORLANDO FL 32896

SYNCHRONY/PAYPAL CREDIT
ATTN: BANKRUPTCY
PO BOX 965064
ORLANDO FL 32896

TRANSUNION
CONSUMER DISPUTE CENTER
PO BOX 2000
CRUM LYNNE PA 19022

U.S. BANKCORP
ATTN: BANKRUPTCY
800 NICOLLET MALL
MINNEAPOLIS MN 55402

U.S. BANKCORP
101 CALIFORNIA ST STE 130
SAN FRANCISCO CA 94111-5875

WEBBANK
ATTN: BANKRUPTCY
215 STATE ST SUITE 1000
SALT LAKE CITY UT 84111

WEBBANK/AVANT
215 STATE ST SUITE 1000
SALT LAKE CITY UT 84111